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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	,
Case number (If known):	Chapter you are filing under: ✓ Chapter 7 □ Chapter 11 □ Chapter 12 □ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Sherie First name L Middle name Gechas Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	First name Middle name Last name First name Middle name Last name	First name Middle name Last name First name Middle name Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>7</u> <u>7</u> <u>2</u> <u>5</u> OR 9 xx - xx	xxx - xx

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De	_{btor 1} Sherie L	Gechas	Case number (if known)
	First Name Middle No	me Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4	Any business names		
7.	and Employer	I have not used any business names or El	Ns.
	Identification Numbers		
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and		Business Hamb
	doing business as names	Business name	Business name
		EIN — - — — — — — —	EIN — - — — — — — —
		LIN	EIN
		EIN — - — — — — — —	EIN
Electronic and			
5.	Where you live		If Debtor 2 lives at a different address:
		1601 Maple Terrace, Unit 1B	
		Number Street	Number Street
			0532
		City State Z	P Code City State ZIP Code
		DuPage	
		County	County
		If your mailing address is different from the above, fill it in here. Note that the court will s	one If Debtor 2's mailing address is different from
		any notices to you at this mailing address.	end yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
			Number Steet
		P.O. Box	P.O. Box
		City State ZI	P Code City State ZIP Code
6	Why you are choosing	Check one:	Ch
٥.	this district to file for	Total Control	Check one:
	bankruptcy	Over the last 180 days before filing this per I have lived in this district longer than in an	ition, Over the last 180 days before filing this petition, I have lived in this district longer than in any
		other district.	other district.
		I have another reason. Explain.	☐ I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)
Caston			

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De	btor 1 SNETIE L First Name Middle Name	e	Gechas Last Name		Case number (if kr.	own)		
	1		Esset Turne					
Pa	Tell the Court About Your Bankruptcy Case							
7.	The chapter of the Bankruptcy Code you are choosing to file	for Bank	ruptcy (Form 2010)). Also,	of each, see <i>Notic</i> go to the top of pa	ce Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing le appropriate box.		
	under		apter 7					
		☐ Cha	oter 11					
		☐ Cha	oter 12					
************		☐ Cha _l	oter 13					
8.	How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 						
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	When When	MM / DD / YYYY	Case number Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	Debtor District		MM/DD/YYYY	Relationship to you Case number, if known		
			Debtor			Relationship to you		
			District	When	MM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	☑ No. ☐ Yes.	residence? No. Go to line 12. Yes. Fill out <i>Initial Sta</i>	itement About an E		and do you want to stay in your Against You (Form 101A) and file it with		
			this bankruptcy petition	n.				

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De	otor 1 Sherie L		Gechas	Case number (if known)			
	First Name Middle Nam		Last Name				
D	rt 3: Report About Any B	usinosa	es You Own as a Soi	la Bassutata			
	Report About Any B	usilless	es rou Own as a soi	e Froprietor			
12.	Are you a sole proprietor	No. C	Go to Part 4.				
	of any full- or part-time business?	☐ Yes.	Name and location of but	siness			
	A sole proprietorship is a		5.				
	business you operate as an individual, and is not a		Name of business, if any				
	separate legal entity such as a corporation, partnership, or						
	LLC.		Number Street				
If you have more than one sole proprietorship, use a							
	separate sheet and attach it to this petition.						
	The same position		City	State ZIP Code			
			Check the appropriate be	ox to describe your business:			
			☐ Health Care Busines	s (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				as defined in 11 U.S.C. § 101(6))			
			☐ None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most rec	appropriate deadlines. If y ent balance sheet, stater ese documents do not ex	the court must know whether you are a small business debtor so that it you indicate that you are a small business debtor, you must attach your ment of operations, cash-flow statement, and federal income tax return or if kist, follow the procedure in 11 U.S.C. § 1116(1)(B).			
	For a definition of small business debtor, see		I am not filing under Cha				
	11 U.S.C. § 101(51D).	■ No.	 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. 				
		☐ Yes.	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
			<u>.</u>				
Pa	rt 4: Report if You Own o	r Have	Any Hazardous Prop	erty or Any Property That Needs Immediate Attention			
44	Do you own or have any	F-86 2 2 2					
14.	property that poses or is	✓ No					
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to			**			
	public health or safety? Or do you own any						
	property that needs immediate attention?		If immediate attention is	s needed, why is it needed?			
	For example, do you own						
	perishable goods, or livestock that must be fed, or a building						
	that needs urgent repairs?		Where is the property?				
	,		where is the property?	Number Street			
				City State ZIP Code			

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Debtor 1 Sherie L	Gechas Last Name	Ca:	se number (# known)	
Part 5: Explain Your Effort	s to Receive a Briefing About C	Credit Counseling		
15. Tell the court whether	About Debtor 1:		About Debtor 2 (Sp	oouse Only in a Joint Case):
you have received a briefing about credit	You must check one:		You must check one):
The law requires that you receive a briefing about credit	✓ I received a briefing from an all counseling agency within the filed this bankruptcy petition, certificate of completion.	180 days before I	counseling age	efing from an approved credit ncy within the 180 days before I uptcy petition, and I received a impletion.
counseling before you file for bankruptcy. You must truthfully check one of the	Attach a copy of the certificate at plan, if any, that you developed with the certificate at the certificate	nd the payment with the agency.	Attach a copy of plan, if any, that	the certificate and the payment you developed with the agency.
following choices. If you cannot do so, you are not eligible to file.	☐ I received a briefing from an approximation in the filed this bankruptcy petition, certificate of completion.	180 days before I	counseling age	efing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion.
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petit you MUST file a copy of the certificate and paym plan, if any.	
can begin collection activities again.	days after I made my request,	an approved agency, but was ain those services during the 7 ade my request, and exigent s merit a 30-day temporary waiver s ervices from an approved agency unable to obtain those services di days after I made my request, and circumstances merit a 30-day tem		n approved agency, but was n those services during the 7 de my request, and exigent merit a 30-day temporary waiver
	To ask for a 30-day temporary w requirement, attach a separate s what efforts you made to obtain t you were unable to obtain it befo bankruptcy, and what exigent cirrequired you to file this case.	heet explaining the briefing, why re you filed for	requirement, atta what efforts you you were unable	day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances ile this case.
	Your case may be dismissed if the dissatisfied with your reasons for briefing before you filed for bank. If the court is satisfied with your still receive a briefing within 30 d. You must file a certificate from the agency, along with a copy of the developed, if any. If you do not d may be dismissed. Any extension of the 30-day dear only for cause and is limited to a days.	rnot receiving a ruptcy. reasons, you must ays after you file. le approved payment plan you o so, your case	dissatisfied with briefing before year of the court is sat still receive a brin You must file a cagency, along we developed, if any may be dismissed Any extension of	re dismissed if the court is your reasons for not receiving a purified for bankruptcy. isfied with your reasons, you must efing within 30 days after you file, ertificate from the approved that copy of the payment plan you or. If you do not do so, your case d. The 30-day deadline is granted and is limited to a maximum of 15
	☐ I am not required to receive a because of:	ed to receive a briefing about ing because of:		d to receive a briefing about ng because of:
		l illness or a mental makes me alizing or making ns about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
	☐ Disability. My physical dis to be unable to briefing in personal disconnections.	ability causes me participate in a on, by phone, or ernet, even after I	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
	Active duty. I am currently of duty in a militar	n active military y combat zone.	Active duty.	I am currently on active military duty in a military combat zone.
	If you believe you are not require briefing about credit counseling, y motion for waiver of credit counse	you must file a	briefing about cre	u are not required to receive a edit counseling, you must file a of credit counseling with the court.

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16. What kind of debts do you have? 16. What kind of debts do you have? 16. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "nocured by an individual primarily business debts." Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 17. Are your filling under Chapter 7. Go to line 16. 18. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 19. Co to line 16. 19. Co to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filling under Chapter 7. Go to line 18. 18. Owe settmate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? 19. How many creditors do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? 19. How many creditors do you estimate that you one of debts of the primary expenses are paid that funds will be available to distribute to unsecured creditors? 19. How much do you estimate your assets to be soon of the primary expenses are paid that funds will be available to distribute to unsecured creditors? 19. How much do you estimate your sees to you set the primary expenses are paid that funds will be available to distribute to be you estimate your assets to you set the primary expenses are paid that funds will be available to distribute to be your estimate your sees to you set the your expenses are paid that funds will be available to distribute to be your estimate your sees to you set the your expenses are paid that funds will be available to destribute to your expenses are paid that funds will be available to distribute to be your expenses are paid that funds will be available t	Deb	tor 1 Sherie L	Gechas	Case number (if known)	
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Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do you estimate that you owe? 19. How much do you estimate that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 20. How much do you estimate your liabilities to be? 21. How much do you estimate your liabilities to be? 22. How much do you estimate your liabilities to be? 23. How much do you estimate your liabilities to be? 24. How much do you estimate your liabilities to be? 25. How much do you estimate your liabilities to be? 26. How much do you estimate your liabilities to be? 27. It has examined this petition, and I declare under penalty of perjury that the information provided is true and correct. 28. It have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter	HTTELOGRAPHICAL STATE				
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18. How many creditors do you estimate that you owe? 1.49		available for distribution			
you estimate that you owe? 50-99	*#####################################	to unsecured creditors?			
100-199					
19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you continue your assets to be worth? 19. Stop your stop your assets to be worth? 19. Stop your stop your stop your your your your your your your your					
estimate your assets to be worth? \$50,001-\$100,000	-			10,001-25,000	More than 100,000
estimate your assets to be worth? \$55,001-\$100,000			\$0-\$50,000	□ \$1.000.001-\$10 million	\$500,000,001-\$1 billion
St0,000,000,001-\$50 billion \$50,000,001-\$10 million \$10,000,001-\$50 billion More than \$50 billion			\$50,001-\$100,000	■ \$10,000,001-\$50 million	■ \$1,000,000,001-\$10 billion
20. How much do you estimate your liabilities to be? \$0.\$50,001-\$100,000		be worth?			
estimate your liabilities to be? \$50,001-\$100,000 \$10,000,001-\$50 million \$510,000,001-\$10 billion \$50,0001-\$10 million \$50,0001-\$10 million \$50,0001-\$10 million \$50,0001-\$10 million \$50,000,001-\$10 million \$50,000,001-\$10 million \$50,000,001-\$50 billion More than \$50 billion For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a banking to case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Executed on Executed on Executed on	***************************************			\$100,000,001-\$500 million	More than \$50 billion
To be? Sign Below Sign Below Sign Below Sign Below Signature of Debtor 1				1/4-2	
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If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Executed on Bullot States Code, specified in this petition. Signature of Debtor 2 Executed on Executed on Executed on Executed on Executed on Executed on Executed States Code, specified in this petition. Signature of Debtor 2	Foi	r you	I have examined this petition, and I d correct.	declare under penalty of perjury that the in	formation provided is true and
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Executed on Signature of Debtor 2 Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Executed on Exec			of title 11, United States Code. I unde	r 7, I am aware that I may proceed, if eligi erstand the relief available under each ch	ble, under Chapter 7, 11,12, or 13 apter, and I choose to proceed
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §\$ 152, 1341, 1519, and 3571. Signature of Debtor 1 Executed on 3 1016 Executed on			If no attorney represents me and I did this document, I have obtained and r	d not pay or agree to pay someone who is ead the notice required by 11 U.S.C. § 34	s not an attorney to help me fill out 12(b).
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §\$ 152, 1341, 1519, and 3571. Signature of Debtor 1 Executed on 3 1016 Executed on			I request relief in accordance with the	e chapter of title 11, United States Code,	specified in this petition.
Signature of Debtor 1 Executed on 3 03 1016 Executed on Executed on			I understand making a false stateme with a bankruptcy case can result in	nt, concealing property, or obtaining mon-	ev or property by fraud in connection
Executed on			$\times \setminus \cdot \cdot \cdot \setminus \setminus$		
Executed on 8 03 1016 Executed on			Signature of Debtor 1	Signature of D	ebtor 2
				16 Executed on	MM / DD /YYYY

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Debtor 1 S	herie	L	Gechas	Case numbe	er (if known)	
First	t Name	Middle Name	Last Name		· •	
For your attor represented b If you are not by an attorney need to file th	represen y, you do	ted	I, the attorney for the debtor(s) named to proceed under Chapter 7, 11, 12, or available under each chapter for which the notice required by 11 U.S.C. § 342 knowledge after an inquiry that the info	13 of title 11, United States the person is eligible. I also (b) and, in a case in which §	Code, and certify th 707(b)(4) d with the	d have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
			David L. DePew, II Printed name Law Office of David L. DePer Firm name 1007 Curtiss Street Number Street Suite 3	∋w, II		
			Downers Grove	IL State		60515 ZIP Code
			Contact phone <u>(630)</u> 963-7500			depewlaw@core.com
			06230690 Bar number	<u>IL</u>		
39			Dai nulliber	State	e	

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ebtor 1	Sherie First Name	L Middle Name	Gech Last Name		=	Case nu	mber (if known)	
oankrupt attorney	if you are filing tcy without an		should und themselves	derstand that m s successfully.	nany people find it	extre	mely difficul is long-term	financial and legal
If you are represented by an attorney, you do not need to file this page.			To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
			court. Even in your sche property or p also deny yo case, such a cases are ra	if you plan to pay dules. If you do no properly claim it a pu a discharge of its destroying or hadomly audited t	a particular debt ou not list a debt, the de as exempt, you may a all your debts if you niding property, falsif	tside o bt may not be do son ying re rs have	f your bankrup not be discha able to keep t nething dishor cords, or lying been accura	e required to file with the otcy, you must list that debt arged. If you do not list he property. The judge can nest in your bankruptcy Individual bankruptcy te, truthful, and complete.
			hired an atto successful, y Bankruptcy	rney. The court w you must be fami Procedure, and th	will not treat you diffe liar with the United S	erently States E court in	because you a Bankruptcy Co	v the rules as if you had are filing for yourself. To be ode, the Federal Rules of ase is filed. You must also
			Are you awa consequence		pankruptcy is a serio	us actio	on with long-te	erm financial and legal
			☑ Yes		2			
					cy fraud is a serious o			r bankruptcy forms are
			□ No □ Yes					
			Did you pay ☑ No ☐ Yes. Nam	e of Person				ou fill out your bankruptcy forms?
			By signing h	ere, I acknowledg	ge that I understand	the risl ware th	ks involved in nat filing a ban	filing without an attorney. I
		ر	c			×		
			Signature of E	Debtor 1			Signature of De	ebtor 2
			Date	MM / DD / / / / / / / / / / / / / / / /	-		Date	
			Contact phone	(630) 561-14			Contact = h = = =	MM/ DD/YYYY
				1000/001-14	F-1		Contact phone	
			Cell phone			_	Cell phone	

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		<u>L</u>	Gechas	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)) First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of	Illinois	

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

\tilde{x}	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 69,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,100.00
1c. Copy line 63, Total of all property on Schedule A/B	\$71,100.00
art 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$113,000.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,800.00
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$8,988.00
Your total liabilities	\$123,788.00
11t 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
as a second (official form 1001)	\$ 2577.00
Copy your combined monthly income from line 12 of Schedule I	
	s 2577.00

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De	btor 1 Sherie L Gechas Ca	ase number (if known)
P	art 4: Answer These Questions for Administrative and Statistical Records	S
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	☐ No. You have nothing to report on this part of the form. Check this box and submit this f ☑ Yes	form to the court with your other schedules.
7.	What kind of debt do you have?	**************************************
	Your debts are primarily consumer debts. Consumer debts are those "incurred by ar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personal, oses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	rt of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ss
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$0.00
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d. Student loans. (Copy line 6f.)	\$0.00
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
	9g. Total. Add lines 9a through 9f.	\$

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	nformation to iden	tify your case and this	s filing:				
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for t	the: Northern District of	Illinois				
Case number			001000 20000				
							if this is an
Official	Form 106	₩B					
3cn0							
n each cat category w esponsible	egory, separately here you think it fi e for supplying co	ts best. Be as comple	s. List an asset only once. If an asset fete and accurate as possible. If two ma	rried people are	filing together, bo	th are eq	ually
n each cate category we responsible write your nart 1: Do you o	egory, separately there you think it fire for supplying conname and case numbers the control of	list and describe items ts best. Be as comple rrect information. If m mber (if known). Ansv esidence, Building,	s. List an asset only once. If an asset fete and accurate as possible. If two ma	rried people are sheet to this for wn or Have an	filing together, bo m. On the top of a	th are eq	t in the
n each cate category we sponsible write your rate. Do you o	egory, separately where you think it file for supplying conname and case numbers the control of	list and describe items ts best. Be as comple rrect information. If m mber (if known). Answ esidence, Building, gal or equitable intere	s. List an asset only once. If an asset fete and accurate as possible. If two malore space is needed, attach a separate wer every question. Land, or Other Real Estate You O	rried people are sheet to this for wn or Have an	filing together, bo m. On the top of a	th are eq	t in the
in each category weresponsible write your in the cart 1: Do you o No. G	egory, separately there you think it fire for supplying conname and case numbers the control of	list and describe items ts best. Be as comple rrect information. If m mber (if known). Answ esidence, Building, gal or equitable intere ty?	s. List an asset only once. If an asset fete and accurate as possible. If two majore space is needed, attach a separate wer every question. Land, or Other Real Estate You Ost in any residence, building, land, or s What is the property? Check all that ap Single-family home Duplex or multi-unit building	wn or Have an imilar property?	filing together, bo m. On the top of a	oth are equiny additions and additions and additions are executed as a second and a second additions are executed as a second and a second additions are executed as a second as	et in the qually ional pages
in each category weresponsible write your in the cart 1: Do you o No. G	egory, separately where you think it file for supplying contains and case numbers and case	list and describe items ts best. Be as comple rrect information. If m mber (if known). Answ esidence, Building, gal or equitable intere ty?	s. List an asset only once. If an asset fete and accurate as possible. If two majore space is needed, attach a separate wer every question. Land, or Other Real Estate You Ost in any residence, building, land, or s What is the property? Check all that ap	wn or Have an imilar property? ply Do r the a Cree	filing together, bo m. On the top of a Interest in not deduct secured cla amount of any secure	aims or exed delaims or exed delaims or exed delaims or many Secured	et in the qually ional pages
n each category weesponsible write your of art 1: Do you o	egory, separately where you think it file for supplying contains and case numbers and case	list and describe items ts best. Be as comple rrect information. If m mber (if known). Answ esidence, Building, gal or equitable intere ty?	s. List an asset only once. If an asset fete and accurate as possible. If two majore space is needed, attach a separate ver every question. Land, or Other Real Estate You Ost in any residence, building, land, or s What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative	wn or Have an imilar property? ply Do r the a Cree	filing together, bom. On the top of a Interest In not deduct secured clamount of any secure ditors Who Have Clair rent value of the	aims or exe d claims or ms Secured Current portion	emptions. Put in Schedule D: d by Property.

If you own or have more than one, list here:

DuPage

County

Street address, if available, or other description

City State ZIP Code

■ Manufactured or mobile home ☐ Land Investment property Timeshare Other_ Who has an interest in the property? Check one.

Who has an interest in the property? Check one.

Other information you wish to add about this item, such as local

Debtor 1 only Debtor 2 only

☐ Single-family home

Duplex or multi-unit building

□ Condominium or cooperative

Debtor 1 and Debtor 2 only

At least one of the debtors and another

What is the property? Check all that apply.

property identification number:

Debtor 1 only

Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this is community property

Describe the nature of your ownership

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

☐ Check if this is community property

Do not deduct secured claims or exemptions. Put

the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

(see instructions)

Fee simple

(see instructions)

Current value of the

entire property?

Other information you wish to add about this item, such as local property identification number:

County

Debtor 2 only

Current value of the

portion you own?

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Debtor 1	Sherie First Name	L Middle Name Last Name	Gechas	Case number (if known)	
1,3.	Street address, if	available, or other description State ZIP Code	What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
	County		Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot Other information you wish to add property identification number:	the entireties, or a life y? Check one. Check if this is concept (see instructions) about this item, such as local	
2. Add the you h	ave attached fo	of the portion you own for al r Part 1. Write that number h	ll of your entries from Part 1, includinere.	ng any entries for pages →	\$69,000.00
you own t	that someone els	ave legal or equitable interesse drives. If you lease a vehicle actors, sport utility vehicles	e, also report it on Schedule G: Execut	registered or not? Include any vehicle ory Contracts and Unexpired Leases.	s
3.1.	Make: Model: Year: Approximate mi		Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot	the amount of any secure Creditors Who Have Clai Current value of the	d claims on Schedule D: ms Secured by Property.
	Other information	on:	Check if this is community propinstructions)		\$
3.2.	Make: Model:	re than one, describe here:	Who has an interest in the property Debtor 1 only Debtor 2 only	y? Check one. Do not deduct secured of the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year: Approximate mil Other informatio		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anot ☐ Check if this is community prop		Current value of the portion you own?
			instructions)		

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le Name Last Name	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property? \$	Current value of th portion you own? \$
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	e. Do not deduct secured clathe amount of any secured Creditors Who Have Claim	\$
	□ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	e. Do not deduct secured clathe amount of any secured Creditors Who Have Claim	\$
	□ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
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	instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
	Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
	Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	At least one of the debtors and another	entire property?	portion you own?
	=		
		Sec. 1	8
1	Check if this is community property (see instructions)	\$	\$
	h		
		Do not doddot boodica ola	

		Current value of the	Current value of th
	At least one of the debtors and another	entire property?	portion you own?
	☐ Check if this is community property (see	\$	\$
1	instructions)	¥	<u> </u>
one list here:			
one, list here:	Who has an interest in the property? Check one	Do not deduct convend along	ima or occupations. But
	Who has an interest in the property? Check one	the amount of any secured	claims on Schedule D:
	Debtor 1 only	Do not acquet accured old	claims on Schedule D:
	Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	claims on Schedule D:
	Debtor 1 only	the amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property.
		Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see

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D	ebtor 1	Sherie First Name	Middle Name	L Last Nam		echas		Case number (if kno	wn)		
		r not realite	Mildule Name	Last Nam							
		W									
L	art 3: Do	escribe You	r Personal	and House	hold Item	S					
Do	you own	or have any l	egal or equita	able interest	in any of th	ne following ite	ems?			Current va	
										Do not dedu	ct secured claims
6	Househol	d goods and	furnishings							or exemption	is.
		Major appliar	_	linens, chin	a, kitchenwa	ire .					
	☐ No							91(19100111)			
	Yes, D	escribe	Household	d Goods						\$	1,500.00
7.	Electronic	s			***************************************		***************************************				
	Examples	Televisions a collections; e	ind radios; au lectronic devi	dio, video, sto ces including	ereo, and di	gital equipment s, cameras, med	t; computer	rs, printers, scanne	ers; music		
	☑ No		r	***************************************			•				
	Yes, D	escribe								\$	æ
8.	Collectible	es of value					***************************************			d	
		Antiques and stamp, coin,	figurines; pai or baseball ca	ntings, prints rd collection:	, or other an s; other colle	twork; books, p	ictures, or abilia, colle	other art objects; ectibles			
	☑ No ☐ Yes. □	escribe		***************************************	***************************************					1	
	_ 100.0	COCIDC:								\$	
9.	Equipmen	t for sports a	nd hobbies							2	
		Sports, photo and kayaks;	ographic, exer carpentry tool	cise, and oth s; musical ins	er hobby eq struments	uipment; bicycl	les, pool ta	ibles, golf clubs, sk	is; canoes		
	☑ No		T					***************************************			
	Yes. D	escribe								\$	
10.	Firearms	i									
	Examples.	Pistols, rifles,	shotguns, an	munition, an	d related eq	uipment					
	☑ No	escribe					***************************************			7	
	— 163. D	escribe								\$	
11.	Clothes										
		Everyday clot	thes, furs, leaf	her coats, de	esigner wear	r, shoes, acces	sories				
	☐ No ☐ Yes D	escribe	Doronol	○ -4b:							500.00
	00. 5	0001100	Personal	Jothing			***************************************			\$	500.00
12.	Jewelry										
	Examples	Everyday jew gold, silver	elry, costume	jewelry, eng	agement rin	gs, wedding rin	igs, heirloo	om jewelry, watches	s, gems,		
	□ No	escribe				······································				1	
									•(*************************************	\$	
13.	Non-farm Examples:	animals Dogs, cats, b	irds, horses								
	☐ No				***************************************		***************************************				
	☐ Yes. D	escribe								\$	
14,		personal and	household i	tems you di	d not alread	ly list, includir	ng any hea	alth aids you did i	not list		
	☑ No	ş (Siz									
		ive specific ation								\$	
15.	Add the d	ollar value of	all of your e	ntries from F	Part 3, inclu	ding any entri	es for pag	jes you have attac	hed	s	2.000.00
	ioi Fart 3.	write that nu	er nere					,,			

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Gechas

Debtor 1 Sile lie	L Last Name Last Name	Gechas	Case number (if known)	
	Middle Halle Last Halle			
Part 4: Describe	Your Financial Assets			
o you own or have	any legal or equitable interest in	any of the following?		Current value of the portion you own?
				Do not deduct secured claims or exemptions.
6. Cash <i>Examples:</i> Money	you have in your wallet, in your hor	me, in a safe deposit box, and	d on hand when you file your petition	
☑ No				
☐ Yes			Cash:	\$
and oth		unts; certificates of deposit; s nultiple accounts with the sar	hares in credit unions, brokerage house ne institution, list each.	s,
☐ No ☑ Yes	*****	Institution name:		
	17.1. Checking account:	Chase Bank		<u>\$</u>
**	17.2. Checking account:	(<u> </u>		\$
	17.3. Savings account:	V		\$
	17.4. Savings account:	8 		\$
	17.5. Certificates of deposit:			- \$
	17.6. Other financial account:			- \$
	17.7. Other financial account:	2		- \$
	17.8. Other financial account:	(- \$
	17.9. Other financial account:			- \$
ÿ				
	nds, or publicly traded stocks			
Examples: Bond fu	inds, investment accounts with brok	erage firms, money market a	ccounts	
☐ Yes	Institution or issuer name:			
				_ \$
				_
				- \$
9. Non-publicly trad	ed stock and interests in incorpo	rated and unincorporated	businesses, including an interest in	
an LLC, partners	hip, and joint venture		notating an interest in	
☑ No	Name of entity:		% of ownership:	
	anc.			\$
Yes. Give specinformation abo	Jul		00/	
☐ Yes. Give spec	Jul			\$

Sherie

Debtor 1

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Debtor 1	Sherie		<u> </u>		Gechas	Case number (if known)	
	First Name	Middle Name	Las	st Name			
Negotia	able instruments i	nclude persona	l check	s, cashie	able and non-negotial ers' checks, promissory fer to someone by sign	notes, and money orders.	
						· ·	
☑ No							
	. Give specific rmation about	Issuer name:					
then	n	-					\$
							\$
		=					\$
							a
	nent or pension les: Interests in IF		ogh, 40	1(k), 403	(b), thrift savings accou	ınts, or other pension or profit-sharing plan	s
☑ Yes	. List each						
	ount separately.	Type of accou	nt:	Institution	n name:		
		401(k) or simila	r nlan:				c
		40 I(K) OI SIIIIIIA	pian.			di \	9
		Pension plan:		COOK	County Pension (p	ending)	\$0.00
		IRA:					. \$
		Retirement acco	ount:				\$
		Keogh:					\$
60		Additional acco	unt:				. \$
		Additional acco	unt:				. \$
							Ψ
	y deposits and p						
Example	lare of all unused les: Agreements v nies, or others	deposits you h with landlords,	ave ma prepaid	rent, pul	at you may continue se olic utilities (electric, ga	rvice or use from a company s, water), telecommunications	
☑ No							
	Contraction of the contraction o		Inct	itution no	me or individual:		
- 103			IIISt	itution na	me or individual;		
		Electric:	-				\$
		Gas:					\$
		Heating oil:	_				\$
		Security deposi	t on rent	al unit:			•
		Prepaid rent:					3
		Telephone:					\$
		1.000000000000000000000000000000000000					\$
		Water:	_				\$
		Rented furniture):				\$
		Other:					•
							2
23 Annulti	oe // contract for	o noded-	and the second second			a nd the series and a nd the series a	
	es (A contract for	a periodic pay	ment o	money	to you, either for life or	for a number of years)	
☑ No							
Yes		Issuer name a	nd desc	ription:			
				, i			_ \$
					71		- \$
							_ \$

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Debtor 1	Sherie	L	Gechas	Case number (if known)	
	First Name Middle N	ame Last Name		V. N. S. M. J. S.	
)	**************************************	1917 1949			arananandarananan karanan paranan 1888 karanan kerperanan kerengan kerengan 1888 kerengan 1888 kerengan 1888 ke
			qualified ABLE program, o	r under a qualified state tuition program.	
☑ No	C. §§ 530(b)(1), 529A(b)), and 529(b)(1).			
		V V6 P			
= 3.53		Institution name and	d description. Separately file the	ne records of any interests.11 U.S.C. § 521(c):
					\$
					\$
					\$
25. Trusts,	equitable or future int able for your benefit	erests in property	(other than anything listed i	n line 1), and rights or powers	
☑ No	able for your beliefit				
	. Give specific)		1010
	rmation about them				\$
	and the state of t				
			and other intellectual prope		
Z No	es: internet domain nan	nes, websites, proce	eds from royalties and licensi	ng agreements	
	. Give specific	***************************************			
	rmation about them				\$
	<u></u>				
27. License	es, franchises, and oth	ner general intangil	oles		
	es: Building permits, ex	clusive licenses, coc	perative association holdings	liquor licenses, professional licenses	
☑ No					oooong
☐ Yes info	. Give specific				6
111101	L.		00;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;		\$
Money or	property owed to you?				Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
28. Tax refu	unds owed to you				
☑ No					
☐ Yes	. Give specific informati	on			â
	about them, including you already filed the re			Federal:	\$
	and the tax years			State:	\$
				Local:	\$
29. Family	cupport				
		ım alimony, spousal	support, child support, mainte	nance, divorce settlement, property settleme	ant
☑ No	•	31 24 SP-245-33	zach zum austragen	names, area social ment, property securific	51 K
☐ Yes	. Give specific informati	on			
				Alimony:	\$
				Maintenance:	\$
		yrocanostoxxxxia		Support:	\$
		and the second		Divorce settlement:	\$
				Property settlement:	\$
30. Other a	mounts someone owe	es you	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100	
⊏хаптри	Social Security bene	efits; unpaid loans y	nents, disability benefits, sick ou made to someone else	pay, vacation pay, workers' compensation,	
🗹 No	Total Paper Variation				
Yes	. Give specific informati	on			
					\$
		- Common			Toward Committee of the

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Debtor 1	Sherie	L	Gechas	Case number (if known)	
	First Name	Middle Name	Last Name		
2. 12.		***************************************			
	t <mark>s in insuran</mark> d es: Health, dis		ce: health savings account (HSA):	credit, homeowner's, or renter's insurance	
☑ No			, (J ()	ordar, nomeowner o, or remer a madrance	
☐ Yes		surance company	Company name:	Beneficiary:	Surrender or refund value:
	or each polic	y and list its value		a section deviation	
				:	\$
					\$ \$
If you ar	e the benefici	ary of a living trust, e	from someone who has died xpect proceeds from a life insurance	ce policy, or are currently entitled to receive	Ψ
property ☑ No	because son	neone has died.			
	. Give specific	information			**************************************
	a anaexa			п	\$
Example	against third es: Accidents,	parties, whether or employment dispute	not you have filed a lawsuit or n s, insurance claims, or rights to suc	nade a demand for payment e	
☑ No	Describe	ch claim			········
Tes.	. Describe eac	cn claim			\$
34. Other co to set o	ontingent and ff claims	d unliquidated claim	s of every nature, including cou	nterclaims of the debtor and rights	umai V
Yes.	Describe eac	ch claim			
					\$
	ancial assets	you did not already	list		
☐ No	O:				
va res.	Give specific	information			s
00 Add 46-	our and a second	0.00 v.c			
for Part	4. Write that	number here	s from Part 4, including any entr	ies for pages you have attached	100.00
					V
		***************************************		10000000000000000000000000000000000000	(274.24.3777
Part 5:	Describe	Any Business-I	Related Property You Ow	n or Have an Interest In. List any r	aal astata in Part 1
07 De					our coluct in ruit i.
	Go to Part 6.	any legal or equitab	le interest in any business-relate	ed property?	
	Go to line 38				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Account	ts receivable	or commissions yo	u already earned		c. cxempuoris.
☐ No					
☐ Yes.	Describe				1
					\$
39. Office e	quipment, fu	rnishings, and supp	modems printers assists for a series		
☐ No		outputers, software	, moderns, printers, copiers, fax machin	es, rugs, telephones, desks, chairs, electronic devices	
☐ Yes.	Describe	***************************************			1
					\$

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Debtor 1	Sherie First Name	L Middle Name Last Na	Gechas	Case number (if known)	
	First Name	Middle Name Last Na	me		
		2 2 22			
	ery, fixtures, e	quipment, supplies you ι	ise in business, and tools of y	our trade	
□ No	ne ov 8				***************************************
☐ Yes.	. Describe				\$
	<u>A</u>				
41. Inventor	ry				
☐ No	20				••••
Yes.	. Describe				\$
	3.	······································			
42. Interest	s in partnersh	ips or joint ventures			
☐ No					
Yes.	. Describe	Name of entity:		% of ownership:	
				5 2 H M2	\$
					\$ \$
					\$
43. Custom	er lists, mailir	ng lists, or other compilat	ions		
	Do your liets	include personally identi	fiable information (as defined i	111100 010111110	
- 165.	No No	module personally ident	nable information (as defined i	n 11 0.5.C. § 101(41A))?	
	Yes. Desc	ribe	**************************************		marge e
	_ 100. 2000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$
44. Any bus	siness-related	property you did not alre	ady list		
	Give specific				
	mation				\$
					\$
					\$
					\$
					•
					3
					\$
45. Add the	dollar value	of all of your entries from	Part 5, including any entries f	or pages you have attached	s
ior Part	o. write that i	number nere		→	\ \
***************************************	***************************************	***************************************		0.000 mm	hade so that have \$174 to \$250 as a second of \$150 \$250 as a second of
Part 6:	Describe A	ny Farm, and Camman	alai Piatra a Barata da		
	If you own or	ny rarm- and Commer have an interest in farmi	cial Fishing-Related Prope and, list it in Part 1.	rty You Own or Have an Interest I	<u> </u>
46. Do you	own or have a	ny legal or equitable inte	rest in any farm- or commercia	al fishing-related property?	
₩ No. 0	Go to Part 7.			24 E	
	Go to line 47.				
					Current value of the
					portion you own? Do not deduct secured claims
47. Farm an	nimale			DKI	or exemptions.
	111111111111111111111111111111111111111	oultry, farm-raised fish			
□ No					
			-		money .
					\$

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Debtor			L		has		Case number (if known)		
	First Name	Middle Name	Last Nam	ne			3 %		
48 Cro	ps—either growin	n or harvested							
		y 01 1101 100100							
	Yes. Give specific								
	information	L	***************************************	······································					\$
49. Far i	m and fishing equ	ipment, implem	ents, mach	ninery, fixtures	s, and tool	s of trade			
	Yes		***************************************						
									\$
50. Fari	m and fishing sup	plies, chemical	s, and feed					***************************************	and the second s
	Yes	***************************************	***************************************		***************************************	······	***************************************		
		L			***************************************		***************************************		\$
51. Any	farm- and comme	ercial fishing-re	lated prope	erty you did n	ot already	list			
ō	Yes. Give specific								7
	information			***************************************					\$
52. Add	d the dollar value o	of all of your en	tries from I	Part 6, includi	ng any ent	ries for page	es you have attache	d	•
for	Part 6. Write that I	number here	***************************************						3
								898 WAY J	
Part 7	Describe A	All Property	You Ow	n or Have a	an Intere	st in Tha	t You Did Not L	ist Above	
53 Do	you have other pr	onorty of any k	ind you did	makalmadi. II	-40				
Exa	mples: Season tickets	, country club men	nbership	not aiready ii	Str				
Ø						***************************************			•
	Yes. Give specific information								\$
								The state of the s	\$ \$
					***************************************				,-
54. Add	I the dollar value o	of all of your en	tries from F	Part 7. Write th	nat number	here			\$
****		***	**********************	*****************************	*************************	*************************	\$	**********	
Part 8	List the To	otals of Eac	h Part of	this Form					
D								75	60,000,00
55. Pan	t 1: Total real estat	te, line 2						→	\$69,000.00
56. Part	t 2: Total vehicles,	line 5			\$				
57. Part	t 3: Total personal	and household	d items, line	15	\$	1,500.0	0		
58. Part	t 4: Total financial	assets, line 36			\$	100.0	00		
59. Part	t 5: Total business	-related proper	ty, line 45		\$				
60. Part	t 6: Total farm- and	d fishing-related	d property,	line 52	\$		_		
61. Part	t 7: Total other pro	perty not listed	d, line 54		+\$				
62 Tata	al norecnal	tv. Add II 50	Albana			2,100.0		ga and garage	->
02. 10(2	al personal proper	ty. Add lines 56	inrough 61.	***************************************	\$	2,100.0	Copy personal pro	perty total 👈	+ \$2,100.00
63. Tota	al of all property o	n Schedule A/B	. Add line 5	5 + line 62		***************	***************************************		\$71,200.00

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Debtor 1	Sherie	L	Gechas	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of II	llinois	
Case number				

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1: Identi	fy the Property You Claim	as Exempt		
1.	☑ You are cla	xemptions are you claiming? iming state and federal nonbani iming federal exemptions. 11 U	kruptcy exemptions. 11		
2.	For any proper	ty you list on Schedule A/B t	nat you claim as exem	pt, fill in the information below.	
	Brief descripti Schedule A/B	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	Household Goods	\$ <u>1,500.00</u>	☑ \$ 1,500.00	735 ILCS 5/12-1001b
	Line from Schedule A/B;	6		☐ 100% of fair market value, up to any applicable statutory limit	1
	Brief description:	Clothing	\$ <u>500.00</u>	☑ \$ <u>500.00</u>	735 ILCS 5/12-1001a
	Line from Schedule A/B:	_11		100% of fair market value, up to any applicable statutory limit	1
	Brief description:	Checking account	\$ <u>100.00</u>	☑ \$ 100.00	735 ILCS 5/12-1001b
	Line from Schedule A/B:	17.1_		☐ 100% of fair market value, up to any applicable statutory limit	2
3.	(Subject to adju		years after that for case	es filed on or after the date of adjustment. 1,215 days before you filed this case?	

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Debtor 1 She river Mails Name Last Nam					-				
The North Name Male Name	Fill in this in	formation to identif	y your case:						
The North Name Male Name	Delivera	Sherie			Gechas				
United States Bankrupicy Court for the: Northern District of Illinois Case number College	Deptor 1		Middle Nam	ie -	DEVICE CENTRAL				
United States Bankruptcy Court for the: Northern District of Illinois Case number If from Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing toggether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. Amount of claim on the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. Amount of claim on the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one secured claim, list the creditors in Part 2. Amount of claim on the creditor in Part 2. Amount of claim on the court with your other control in the other creditors in Part 2. Amount of claim on the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one creditor has more than on		First Name							
Case number Check if this is an armended filing	0.000				Last Name				
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately As much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor's parately for each claim. If more than one creditor has a particular claim, list the creditor's name. 2. List all secured claims. If a creditor has a particular claim, list the creditor's parately for each claim. If more than one creditor has a particular claim, list the creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor's name. 3. List all secured claims. If a creditor has nore than one secured claim, list the creditor's name. 4. So of the date you file, the claim is: Check all that apply. 4. As of the date you file, the claim is: Check all that apply. 5. List all secured claims. 5. S. S. S. 8. S. S. 8. S. S. 9. Colomborate Name Corditor's Name Number Street 1. List All secured claims. If a creditor has north and the claim is: Check all that apply. 1. Disputed Who owes the debt? Check one. 1. Disputed Who owes the debt? Check one. 1. Disputed Number S	United States	Bankruptcy Court for the	: Northern D	strict of Illinois					
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (If known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1: List All Secured Claims List All Secured Claims List All Secured Claims Column A								_	
Schedule D: Creditors Who Have Claims Secured by Property Schedule D: Creditors Who Have Claims Secured by Property	(If known)		"						
Schedule D: Creditors Who Have Claims Secured by Property								amend	ea filing
Schedule D: Creditors Who Have Claims Secured by Property	Official	Form 106D							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 11	2-110-05-1				·				
additional pages, write your name and case number (it known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. No. Check this claims. If or creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. No. Check this claims in alphabetecla order according to the creditor's name. No. Check list the claims in alphabetecla order according to the creditor's name. Steet	Sched	ule D: Cre	ditors	Who H	ave Cla	ims Secur	ed by Prop	erty	12/15
adoutroal pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. West Fill in all of the information below. Part 1: List All Secured Claims List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. US Bank	Be as comp information	lete and accurate as	possible. If	two married p	eople are filing	together, both are ed	qually responsible f	or supplying correc	;t
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.	additional p	ages, write your nan	ne and case	number (if kn	own).	number the entries,	and attach it to this	form. On the top of	any
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.									
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Debtor 2 only An agreement you made (such as mortgage or secured car loan)	_								
			- J		t you made (such a	s mortgage or secured			
			12		(such as tax lien m	nechanic's lien\			

community debt Date debt was incurred

At least one of the debtors and another

Check if this claim relates to a

☐ Judgment lien from a lawsuit Other (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

113,000.00

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Fill in this	information to iden	tifu your coos		- 1		¥
FIIIIIII		try your case:				
Debtor 1	Sherie First Name	L Middle Name	Gechas Last Name	- (
Debtor 2		77000 000000000000000000000000000000000	10-102000 C Shirman A			
	ng) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for t	he: Northern District	of Illinois	ľ		☐ Check if this is an
Case number (If known)	er					amended filing
Official	Form 106E	/F				
Sched	dule E/F: C	reditors V	Vho Have Unse	cured Clain	ns	12/15
List the oth A/B: Proper creditors wineeded, cop any addition	er party to any exec rty (Official Form 100 ith partially secured py the Part you need nal pages, write you	utory contracts or of A/B) and on Scheo claims that are list f, fill it out, number r name and case no	1	sult in a claim. Also li d Unexpired Leases (ho Have Claims Secur	st executory cont Official Form 106 red by Property, If	racts on Schedule G). Do not include any more space is
	List All of Your PF					
	creditors have prior Go to Part 2.	ity unsecured claim	s against you?			
Yes.						
List all of each clair nonpriori	of your priority unse im listed, identify wha ity amounts. As much	it type of claim it is. It as possible, list the	reditor has more than one priority f a claim has both priority and no claims in alphabetical order acco Part 1. If more than one creditor	npriority amounts, list the	at claim here and	show both priority and
			instructions for this form in the in			
					Total claim	Priority Nonpriority amount amount
2.1 Inter	nal Revenue Sen	rico		7 7 0 5		00.004/19(74)-004(EXHIVENING)(00)(00)(00)(00)(00)(00)(00)(00)(00)(0
Priority C	reditor's Name	/ice	Last 4 digits of account numl		\$1,800.00 \$	\$
P.O. Number	Box 7346 Street	<u>=</u>	When was the debt incurred?	12/31/2012		
Phila	delphia	PA 19101	As of the date you file, the cla	im is: Check all that apply	<i>Y</i> .	
City		State ZIP Code	☐ Contingent☐ Unliquidated			
	curred the debt? Che otor 1 only	ck one.	Disputed			
Deb Deb	otor 2 only		Type of PRIORITY unsecure	ad claim:		
☐ Deb	otor 1 and Debtor 2 only		Domestic support obligations			
	east one of the debtors a		Taxes and certain other debt			
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	claim subject to offse	1?	intoxicated Other, Specify			Pr.
☐ No☐ Yes			Other. Specify		•	
2.2			Land a Party of			
Priority C	reditor's Name		Last 4 digits of account numb		\$ \$	\$
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	curred the debt? Che	ck one.	☐ Disputed			
	itor 2 only		Type of PRIORITY unsecure			
Deb	tor 1 and Debtor 2 only		Domestic support obligations			
At le	east one of the debtors a		Taxes and certain other debts			
☐ Che	eck if this claim is for	a community debt	Claims for death or personal intoxicated	injury while you were		
Is the c	claim subject to offset	1?	Other. Specify		.	

☐ Yes

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Debto	or 1 Sherie	Middle Name	L Last Name	Gechas	Case number (if known)	8		
Par				- Continuation Page				
				THE STREET WAS ASSESSED.	AV IIII			
Arte	r listing any entr	ies on this page	, number them	beginning with 2.3, followed	by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
_	Priority Creditor's Nam	e		Last 4 digits of account numb	per	\$	\$. \$
	Number Street			When was the debt incurred?				
	Number Street			As of the date you file, the cla	im ie: Chack all that apply			
				Contingent	illi is. Check all that apply.			
	City	State	ZIP Code	Unliquidated				
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	Debtor 1 only	debtr check one	€	Type of PRIORITY unsecure	ed claim:			
	Debtor 2 only			☐ Domestic support obligations				
	Debtor 1 and De			Taxes and certain other debts	s you owe the government			
	At least one of t			☐ Claims for death or personal				
	Check if this	claim is for a con	munity debt	intoxicated Other. Specify				
	Is the claim subje	ect to offset?						
	☐ No							
	Yes							
							Φ.	
	Priority Creditor's Name	е		Last 4 digits of account numb	oer	Ψ	Φ	Φ
	Number Street			When was the debt incurred?	E			
	**************************************	,		As of the date you file, the cla	im is: Check all that apply			
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	City	State	ZIP Code	Unliquidated				
	M/ha incurred the	dahas Charles		☐ Disputed				
	Who incurred the Debtor 1 only	debt? Check one		Type of PRIORITY unsecure	ad alaimi			
	Debtor 2 only							
	Debtor 1 and De			Domestic support obligationsTaxes and certain other debts				
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	☐ Check if this o	claim is for a com	munity debt	intoxicated				
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						\$	_	_
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	Number Street			When was the debt incurred?				
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	☐ No							
	☐ Yes							

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Debt	tor 1	Sherie First Name Middle Name	L Last Name	Gechas	Case number (if known)	
Par	rt 2:	List All of Your NONPRIO	RITY Uns	ecured Claims		Н
		y creditors have nonpriority un b. You have nothing to report in the es				- Reconstruction of the Control of t
	nonprio include	ority unsecured claim, list the cre	editor separa editor holds a	tely for each claim.	rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not it the other creditors in Part 3.If you have more than three not	list claims already
4,1	100000000000000000000000000000000000000	Bank			Last 4 digits of account number 2 1 9 7	s 935.00
		riority Creditor's Name				\$ 935.00
	P.O Numbe	D. Box 790408 er Street			When was the debt incurred?	
		Louis	МО	63179		
	City	=25.79	State	ZIP Code	As of the date you file, the claim is: Check all that apply.	100
	Ø D	incurred the debt? Check one.			☑ Contingent ☑ Unliquidated ☐ Disputed	
	☐ D	ebtor 2 only bettor 1 and Debtor 2 only at least one of the debtors and anothe Check if this claim is for a commu			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the				Debts to pension or profit-sharing plans, and other similar debts Other. Specify	100 000 000 000 000 000 000 000 000 000
4.2	Сар	oital One			Last 4 digits of account number 8 3 8 8	\$ 700.00
	Nonpri	iority Creditor's Name	(1)	,	When was the debt incurred?	
). Box 6492				
×		er Street ol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	A A A A A A A A A A A A A A A A A A A
	City		State	ZIP Code	Contingent	
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		lebtor 1 only			☐ Disputed	
		ebtor 2 only lebtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		t least one of the debtors and anothe			☐ Student loans	
					Obligations arising out of a separation agreement or divorce	
		theck if this claim is for a commu	unity debt		that you did not report as priority claims	
	Is the	e claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
					Other. Specify	
4.3	***************************************		***************************************	***************************************		
	Nonpri	oital One iority Creditor's Name			Last 4 digits of account number <u>8 5 3 1</u>	s 2,246.00
). Box 6492			When was the debt incurred?	
	Numbe					
	City	rol Stream	IL State	60197	As of the date you file, the claim is: Check all that apply.	
			State	ZIP Code	✓ Contingent	
		incurred the debt? Check one.			✓ Unliquidated	
		ebtor 1 only			☐ Disputed	
		Pebtor 2 only Pebtor 1 and Debtor 2 only			E 2002-00-200-200-0	
		it least one of the debtors and anothe	r		Type of NONPRIORITY unsecured claim:	
		Check if this claim is for a commu	inity doba		Student loans	
			anny debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the	e claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
					Other. Specify	

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Debte	or 1	Sherie First Name Middle Name	L Last Nam	Gechas	Case number (if known)	
Par	t 2:	Your NONPRIORITY Uns	ecured C	laims — Continuat	ion Page	
Afte	r listir	ng any entries on this page, n	umber the	m beginning with 4.4	, followed by 4.5, and so forth.	Total claim
4.4		Chase			Last 4 digits of account number 1 9 3 5	s 500.00
	P.O.	rity Creditor's Name Box 530942			When was the debt incurred?	
	Atla		GA	30353	As of the date you file, the claim is: Check all that apply.	
		ncurred the debt? Check one.	State	ZIP Code	✓ Contingent ✓ Unliquidated □ Disputed	
	De De	ebtor 1 only ebtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ At	btor 1 and Debtor 2 only least one of the debtors and anothe neck if this claim is for a comm			□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		claim subject to offset?	unity debt		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
4.5	ч те	S				
	Capi	tal One rity Creditor's Name			Last 4 digits of account number 3 3 1 6	<u>\$ 496.00</u>
	P.O.	Box 6492 Street			When was the debt incurred?	
	Caro	ol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
			State	ZIP Code	✓ Contingent✓ Unliquidated	
		ncurred the debt? Check one. btor 1 only			☐ Disputed	
	☐ De	btor 2 only			Type of NONPRIORITY unsecured claim:	
		btor 1 and Debtor 2 only least one of the debtors and anothe	er		Student loans	
		eck if this claim is for a comm			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
		claim subject to offset?	anney dobe		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
	☐ No ☐ Ye				Guilei. Specify	
4.6	***************************************					s 478.00
	Hom	e Depot rity Creditor's Name			Last 4 digits of account number 2 9 7 2	Ψ
	P.O.	Box 78011			When was the debt incurred?	
	Phoe		AZ	85062	As of the date you file, the claim is: Check all that apply.	
	City		State	ZIP Code	✓ Contingent	
		ncurred the debt? Check one.			✓ Unliquidated ☐ Disputed	
		btor 1 only btor 2 only			T	
	De De	btor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		least one of the debtors and anothe	ır		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Ch	eck if this claim is for a commi	unity debt		you did not report as priority claims	
	Is the	claim subject to offset?	147		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☐ No					

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Debto	or 1	Sherie First Name Middle Name	L Last Nam	Gechas	Case number (if known)	
Par	t 2:	Your NONPRIORITY Un	secured C	laims — Continuat	ion Page	
Afte	r listin	g any entries on this page,	number the	m beginning with 4.4	1, followed by 4.5, and so forth.	Total claim
4.7	Application of the second	ick Bank			Last 4 digits of account number 2 8 4 2	\$_2,013.00
	177 - 1700	rity Creditor's Name Box 660702			When was the debt incurred?	
	Number	(TX	75266	As of the date you file, the claim is: Check all that apply.	
	City	ncurred the debt? Check one.	State	ZIP Code	✓ Contingent ✓ Unliquidated	
	🔽 De	btor 1 only			☐ Disputed	
	De De	btor 2 only btor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	s
		least one of the debtors and anoti			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		eck if this claim is for a comr claim subject to offset?	munity debt		Debts to pension or profit-sharing plans, and other similar debts	
	No Yes				Other. Specify	
4.8	Walr	mart/Synchrony Bank			Last 4 digits of account number 0 7 7 4	\$ 620.00
	Nonprio	rity Creditor's Name Box 530927		,	When was the debt incurred?	
	Number	Street	222.00	Texts a second	As of the date you file, the claim is: Check all that apply.	
	Atlar	nta	GA State	30353 ZIP Code	Contingent	
	Who i	ncurred the debt? Check one.			✓ Unliquidated	
	☑ De	btor 1 only			☐ Disputed	
		btor 2 only btor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		least one of the debtors and anoth	her		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Ch	eck if this claim is for a comr	munity debt		you did not report as priority claims	
		claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☐ No☐ Yes					
4.9	D	P	***************************************		Last 4 digits of account number 4 8 1 7	_{\$} 500.00
		rity Creditor's Name				
	P.O.	Box 78009 Street			When was the debt incurred?	
	Phoe	, (20)(20)	AZ	85062	As of the date you file, the claim is: Check all that apply.	
	#3 #7		State	ZIP Code	✓ Contingent✓ Unliquidated	
		ncurred the debt? Check one. btor 1 only			Disputed	
	☐ De	btor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ De	btor 1 and Debtor 2 only			Student loans	
	-	least one of the debtors and anoth			Obligations arising out of a separation agreement or divorce that	
		eck if this claim is for a comr	nunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the	claim subject to offset?			Other. Specify	
	☐ Yes					

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Debto	Sherie L First Name Middle Name	- Last Nam	Gechas	Case number (if known)	
Par	Your NONPRIORITY Unse			tion Page	
Afte	r listing any entries on this page, nu	mber the	m beginning with 4.	4, followed by 4.5, and so forth.	Total claim
4.10	Credit First National			Last 4 digits of account number 5 9 9 4	\$ 500.00
	Nonpriority Creditor's Name 6275 Eastland Road			When was the debt incurred?	
	Number Street Cleveland	ОН	44142	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one. ✓ Debtor 1 only	State	ZIP Code	✓ Contingent ✓ Unliquidated □ Disputed	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commu Is the claim subject to offset?			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
1000	☐ No ☐ Yes				
	"			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		<u> </u>	When was the debt incurred?	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	Oity Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed	
	 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 		¥	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commuls the claim subject to offset?☐ No	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	Yes	***************************************			
	New York Constitution			Last 4 digits of account number	\$
	Nonpriority Creditor's Name			When was the debt incurred?	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated ☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	□ At least one of the debtors and another□ Check if this claim is for a community			 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? ☐ No ☐ Yes			Other. Specify	

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City State ZIP Code	se this pa kample, it then list	age only if you hav f a collection agen the collection age	e others to be cy is trying to ency here. Simi	notified about collect from yo larly, if you have	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Part 2: Creditors with Nonpriority Unsecured Claims	Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Last 4 digits of account number					Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Clair
Name Claims Claims Claims Claims Claims Part 2 did you list the original creditor?					Last 4 digits of account number
Line	City	***************************************	State	ZIP Code	
Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with P	Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number					Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
City State ZiP Code Last 4 digits of account number	Number	Street			
Name On which entry in Part 1 or Part 2 did you list the original creditor?					
Number Street Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Part 3: Creditors with Part 4: Creditors with Part 4: Cred	City		State	ZIP Code	Last 4 digits of account number
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority					On which entry in Part 1 or Part 2 did you list the original creditor?
Part 2: Creditors with Nonpriority Unsecured Claims	Name			·	line of (Check anal) Port 1: Creditors with Priority Unacquired Claims
Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor?	Number	Street			_
Name Con which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):					
Name City State ZIP Code Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Priority Unsecured Claims Part 5: Creditors with Priority Unsecured Claims Part 6: Check one): Part 1: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Cl	City		State	7IP Code	Last 4 digits of account number
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		***************************************	***************************************		
Part 2: Creditors with Nonpriority Unsecured Claims Claims	Name				n —
Claims Last 4 digits of account number	Number	Street			
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):					
Name City State ZIP Code	City	X/-	State	7ID Code	Last 4 digits of account number
Line of (Check one):	City	***************************************	State	ZIP Code	
Claims Last 4 digits of account number Name On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 2: Creditors with Priority Unsecured Claims Claims Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims	Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):	Nimber	0			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Number Street	Number	Street			
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Number Street				=======================================	Look A digite of pagount number
Name Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Number Street City State ZIP Code Name On which entry in Part 1 or Part 2 did you list the original creditor? Number Street Description: □ Part 1: Creditors with Priority Unsecured Claims Number Street	City		State	ZIP Code	Last 4 digits of account number
Number Street Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims	Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Claims Last 4 digits of account number Name On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims					Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account number Name Dn which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):	Number	Street			Part 2: Creditors with Nonpriority Unsecured
Name On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims					
Number Street Line of (Check one): Part 1: Creditors with Priority Unsecured Claims	City		State	ZIP Code	Last 4 digits of account number
Number Street Line of (Check one): Part 1: Creditors with Priority Unsecured Claims	Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street					
— VIDE OF OUR PROPERTY OF THE	Number	Street			

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	Sherie First Name Middle Name	L Last Name	Gechas	Case number (if known)
	dd the Amounts for Ea		cured Claim	
6. Total the a	amounts of certain types amounts for each type of	of unsecured claims unsecured claim.	s. This information	is for statistical reporting purposes only. 28 U.S.C. § 159.
				Total claim
Total claims	6a. Domestic support o	bligations	6a	\$
from Part 1	6b. Taxes and certain o government	ther debts you owe t	he 6b	\$
	6c. Claims for death or intoxicated	personal injury while	you were 6c	\$
	6d. Other. Add all other p Write that amount he	priority unsecured clair re.	ns. 6d	+ \$
	6e. Total . Add lines 6a th	rough 6d.	6e	\$
				Total claim
Total claims	6f. Student loans		6f.	\$
from Part 2	6g. Obligations arising or divorce that you claims	out of a separation a did not report as pric	greement ority 6g	\$
	6h. Debts to pension or similar debts	profit-sharing plans	, and other 6h	\$
	6i. Other. Add all other r Write that amount her		claims. 6i.	+ \$
	6j. Total. Add lines 6f thre	ough 6i.	6j.	\$

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Debtor	Sherie	L	Gechas
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse If filing)	First Name	Middle Name	Last Name
United States Case number	Bankruptcy Court fo	rthe: Northern District of I	Ilinois

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company wit	h whom you	have the contract or lease	State what the contract or lease is for
2.1					e
annound	Name				_
	Number	Street			_
***************************************	City		State	ZIP Code	
2.2					THE REPORT OF THE PROPERTY OF
	Name			2	_
	Number	Street			- ,
	City	***************************************	State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4		*******************************	5744433444444444444444444411111111111111		
- I	Name			ĕ.	_
	Number	Street			= .
ecconomic	City	***************************************	State	ZIP Code	
2.5			nii (100 (100 (100 (100 (100 (100 (100 (1	10 mm 1 m	
zaniman)	Name				
	Number	Street			_
	City		State	ZIP Code	_

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Last Name
Last Name
5

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

5	Doyou hav □ No ☑ Yes	ve any codebtors	? (If you are filing a joint case, do not l	ist either spouse as a	codebtor.)
2.	Within the Arizona, Ca	last 8 years, hav alifornia, Idaho, Lo	e you lived in a community property puisiana, Nevada, New Mexico, Puerto	state or territory? (0 Rico, Texas, Washing	Community property states and territories include gton, and Wisconsin.)
	No. Go	to line 3.			
			rmer spouse, or legal equivalent live w	th you at the time?	
	☐ No		, , , , , , , , , , , , , , , , , , , ,	ni Zanamana musa	
			inity state or territory did you live?	∍ Fil	Il in the name and current address of that person.
					in the name and eartern address of that person.
	Nan	me of your spouse, form	er spouse, or legal equivalent	-	
	Nive	mber Street			
	Nun	mber Street			
	City	,	State	717 0 1	
	City		State	ZIP Code	
3. I	n Column	1, list all of your	codebtors. Do not include your spo	use as a codebtor if	your spouse is filing with you. List the person
	shown in I	line 2 again as a	codebtor only if that person is a gua	rantor or cosigner. N	Make sure you have listed the creditor on
	Schedule I	D (Official Form	106D), Schedule E/F (Official Form 1	06E/F), or Schedule	G (Official Form 106G). Use Schedule D,
	Schedule i	E/F, or Schedule	G to fill out Column 2.		
	Column 1	: Your codebtor			Column 2: The senditude when the send of t
		. Tour codebior			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1					
	Name				Schedule D, line
	Number	Street			Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	<u> </u>
3.2			V 400 100 100 100 100 100 100 100 100 100		
	Name				— ☐ Schedule D, line
					☐ Schedule E/F, line
	Number	Street			□ Schedule G, line
	City		State		
3.3		***************************************	State	ZIP Code	
3.5	Name				Schedule D, line
	Manie				☐ Schedule E/F, line
	Number	Street			Schedule G, line
					Scriedule G, line
	City	metrono (trotti i martino di mart	State	ZIP Code	

Fill in this information to identify	your case:				
Debtor 1 Sherie	L	Gechas			
First Name Debtor 2	Middle Name	Last Name			
Spouse, if filing) First Name	Middle Name	Last Name			
Inited States Bankruptcy Court for the:	Northern District of Illinois				
Case number				Check if the	
		_			ended filing plement showing postpetition chapter 13
					e as of the following date:
fficial Form 106l	=			MM / D	D / YYYY
chedule I: You	ur Income				12/15
Part 1: Describe Employn Fill in your employment	e top of any additional pa	ges, write your na	me an	d case number (if k	use. If more space is needed, attach a nown). Answer every question.
information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status		ed .		☑ Employed □ Not employed
Include part-time, seasonal, or					
self-employed work. Occupation may include student or homemaker, if it applies.	Occupation	Forensic Rac	diogra	pher	-
	Employer's name	Cook Co. Me	edical	Examiner	
	Employer's address	2121 W. Har	rison	Street	Number Street
		8			
		Chicago		IL .	ND
	Harris (Salah Salah Sala	City	State	ZIP Code	City State ZIP Code
	How long employed the	ere? 9 mos.			9 mos.
art 24 Give Details Abou	t Monthly Income				
	f the date you file this form	m. If you have noth	ing to r	eport for any line, wr	ite \$0 in the space. Include your non-filing
If you or your non-filing spouse hibelow. If you need more space, a	ave more than one employe attach a separate sheet to the	er, combine the info nis form.	ormatio	n for all employers fo	or that person on the lines
List monthly gross wages, sal	lary, and commissions /he	efore all payroll	Ų.	For Debtor 1	For Debtor 2 or non-filing spouse
deductions). If not paid monthly,	, calculate what the monthly	/ wage would be.	2.	\$ 3,500.00	\$
Estimate and list monthly ove	rtime pay.		3.	+\$0.00	+ \$ 0.00
Calculate gross income. Add l	ine 2 + line 3.		4.	\$_3,500.00	\$

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Debtor 1	Sherie L Gechas First Name Middle Name Last Name		Case number ((if known)		
			For Debtor 1	01001-001-01	For Debtor 2 or non-filing spouse		O DOO DE PERCENCIA DE LA CONTRACTION DEL CONTRACTION DE LA CONTRAC
Cop	y line 4 here	4.	\$_3,500.0	0	\$		
5. List	all payroll deductions:						
	Tax, Medicare, and Social Security deductions	5a.	s 540.0	ın	¢		
	Mandatory contributions for retirement plans	5a.	\$ <u>540.0</u>	<u></u>	\$ \$		
	Voluntary contributions for retirement plans	5c.	\$ 300.0	0	\$ \$		
	Required repayments of retirement fund loans	5d.	\$	_	\$		
	Insurance	5e.	\$ 35.0	0	\$		
5f.	Domestic support obligations	5f.	\$		\$		
5g	Union dues	5g.	\$48.0	0	\$		
5h	Other deductions. Specify:	5h.	+\$		+ s		
	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ 923.0	0	\$		
7. Ca	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,577.0	0	\$		
8. List	all other income regularly received:						
8a.	Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		\$		
8b	Interest and dividends	8b.	S		s		
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive		Ψ	_	<u>*</u>		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	_	\$		
	Unemployment compensation	8d.	\$		\$		
	Social Security	8e.	\$	_	\$		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		œ.				
		8f.	\$	-	\$		
	Pension or retirement income	8g.	\$	_	\$		
8h	Other monthly income. Specify:	8h.	+\$	_	+\$		
	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	0	\$		
Add	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,577.00	<u>•</u>	s=	= \$	2,577.00
Incl frier	te all other regular contributions to the expenses that you list in Schedulde contributions from an unmarried partner, members of your household, your or relatives.	our d	lependents, your r				
	not include any amounts already included in lines 2-10 or amounts that are r cify:			pense	es listed in <i>Schedule J.</i> 11. +	· s	
12. Ad	the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Your Assets and Liabilities and Certain S	result	t is the combined	month it app	nly income.	\$	2,577.00 bined
√	you expect an increase or decrease within the year after you file this f	orm?	<u> </u>			mont	thly income
U	Yes. Explain:						

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Fill in this	information to identify	your case:					
Debtor 1	Sherie	L	Gechas				
A7-071 W. W.	First Name	Middle Name	Last Name	Check	if this is:		
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name		amended fi	-	
United State	es Bankruptcy Court for the:	Northern District of I	llinois			showing post; f the following	petition chapter 13 date:
Case numbe	er			-	/ DD / YYYY		
Official	Form 106J						
<u>Sche</u>	dule J: You	ur Exper	ises	ts.			12/15
information	olete and accurate as po a. If more space is neede Answer every question. Describe Your Hou	ed, attach another	ied people are fili sheet to this form	ng together, both are equa . On the top of any additio	ily responsi nal pages, v	ble for supply vrite your nam	ing correct e and case number
1. Is this a i							
9	So to line 2.						
	Does Debtor 2 live in a s	eparate household	1?	x			
_	□ No						
	Yes. Debtor 2 must file	Official Form 106J	-2, Expenses for S	eparate Household of Debto	r 2.		
2. Do you h	ave dependents?	☑ No				_	
Do not list Debtor 2.	t Debtor 1 and	Yes. Fill out the	is information for	Dependent's relationship to Debtor 1 or Debtor 2	000000000000000000000000000000000000000	Dependent's age	Does dependent live with you?
Do not sta	ate the dependents'			5.			□ No □ Yes
names.							□ No
							Yes
							☐ No
				-	-		☐ Yes
			39	:			□ No
							☐ Yes
				-			☐ No ☐ Yes
expenses	expenses include s of people other than and your dependents?	□ No ☑ Yes			9 99999 997(11000)11)103(1)12/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2	П	
Part 2:	Estimate Your Ongoi	na Monthly Evne	ınsas	00000000000000000000000000000000000000	***************************************	***************************************	
				re using this form as a sup	nloment!-	o Chonta - 40	
expenses a	s of a date after the ban	kruptcy is filed. If t	his is a suppleme	ental <i>Schedule J</i> , check the	box at the	top of the forn	ase to report n and fill in the
500	enses paid for with non	-cash government	assistance if you	know the value of			
	ance and have included					Your expe	nses
	al or home ownership e for the ground or lot.	xpenses for your r	esidence. Include	first mortgage payments and	d 4.	\$	870.00
2	cluded in line 4:				7.		
	al estate taxes				4a.	\$	0.00
4b. Pro	pperty, homeowner's, or re	enter's insurance			4b.	\$	45.00
4c. Ho	me maintenance, repair, a	and upkeep expense	es		4c.	\$	75.00
4d. Hor	meowner's association or	condominium dues			4d.	\$	297.00

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Debtor 1	Sherie		L	Gechas	Case number (if known)	
	First Name	Middle Name	Last Name		odoo Harrisor (vinionii)	

			Your ex	rpenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	90.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7,	\$	350.00
8,	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	-	20.00
11.	Medical and dental expenses	11.	-	50.00
12.	Transportation. Include gas, maintenance, bus or train fare.	2.32	Ψ	
	Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	7	45.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	50.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	335.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.		0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19.	Other payments you make to support others who do not live with you.		Ψ	
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		1	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes		\$	
	20c. Property, homeowner's, or renter's insurance	20b.	\$ \$	586 - 2000
	20d. Maintenance, repair, and upkeep expenses	20c.		0.00
	20e. Homeowner's association or condominium dues	20d.	024	0.00

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Debtor	Sherie First Name	Middle Name	L Last Name	Gechas	Case number (if kn	iown)			
21. Ot l	her. Specify:					21.	+\$		
22. Ca	lculate your mon	thly expenses.						***************************************	
228	a. Add lines 4 thro	ugh 21.				22a.	\$. 2	2,662.00
22t	o. Copy line 22 (m	onthly expenses	for Debtor 2), if	any, from Official Form 10	06J-2	22b.	\$		0.00
220	c. Add line 22a and	d 22b. The result	is your monthly	expenses.		22c.	\$	2	2,662.00
									······································
23. Calc	culate your montl	140						,	2,577.00
23a.	Copy line 12 (yo	our combined mo	nthly income) f	rom Schedule I.		23a.	\$		2,577.00
23b.	Copy your mont	thly expenses fro	m line 22c abo	ve.		23b.	-\$	2	2,662.00
23c.	Subtract your m	onthly expenses	from your mon	thly income.					
	The result is you	ur monthly net ind	come.			23c.	\$		-85.00
For	example, do you e tgage payment to	expect to finish pa increase or decre	aying for your c	penses within the year af ar loan within the year or o	io you expect your				
	es. Explain h		P			0.000			

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Debtor 1	Sherie	L	Gechas
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	r the: Northern District of I	llinois

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	-
Under penalty of perjury, I declare that I have react that they are true and correct.	d the summary and schedules filed with this declaration and
* Jhu f Ch	x
Signature of Debtor 1	Signature of Debtor 2
Date 08 03 201 P	Date

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Sherie First Name	L Middle Name	Gechas Last Name	
Debtor 2 (Spouse, if filing)	-1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern District of	Ilinois	
Case number (If known)				Check if this is a amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 4: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☑ Yes
Description of 1601 Maple Terrace, Unit 1B property securing debt: Lisle, IL 60532	Retain the property and enter into a Reaffirmation Agreement.	— 766
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	— 103
	Retain the property and [explain]:	18.1
Creditor's name:	☐ Surrender the property.	□ No
	Retain the property and redeem it.	Yes
Description of property securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No
	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	ricam materi rigicoment.	

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		expired personal p sonal property lease		does not assume it. 11 U.S.C. § 365(p)(2).
_essor's na		sorial property lease		Will the lease be assumed?
		~/422/44 4444444444444444444444444444444	1 + 1 + 1 1 1 + 1 1 (1 (1)(1 (1	□ No □ Yes
Description property:	of leased		XXXXXX	☐ Yes
essor's n				□ No
escription	n of leased		4 () - ()	□ Yes
roperty:	, or loaded			
essor's na	ame:			□ No
escriptior roperty:	of leased			Yes
essor's na	ame:	errenizione del commence del co		□No
escriptior operty:	of leased			Yes
essor's na	ame;			□ No
escription	of leased	en en en e	anni kasa yangan ing anggangan yangga m ana ang anggangan manasan kasa ang ang ang ang ang ang ang ang ang an	Yes
essor's na	ame:			□ No
escription operty:	of leased	**************************************		Yes
essor's na	ıme:			□ No
escription	of leased		entertetania en esta esta esta esta esta esta esta esta	☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Northern District Of Illinois

In					
	5	ilerie L. Gech	42	Case No.	2
De	btor			Chapter	7
		DISCLOSURI	E OF COMPENSATION C	F ATTORNEY FOR DI	EBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the all named debtor(s) and that compensation paid to me within one year before the filing of the petition is bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debt contemplation of or in connection with the bankruptcy case is as follows:				of the petition in
	Fo	· legal services, I have agre	ed to accept	\$	1300.00
	Pri	or to the filing of this stater	nent I have received	\$_	1800.00
	Ba	ance Due			0.00
2.	The	e source of the compensation	on paid to me was:		
		Debtor	Other (specify)	G.	
3.	The	source of compensation to	be paid to me is:		
		Debtor	Other (specify)) / A	
4.		I have not agreed to s members and associates o	hare the above-disclosed cor f my law firm.	npensation with any other	person unless they are
		I have agreed to share members or associates of people sharing in the com	the above-disclosed compensions law firm. A copy of the appensation, is attached.	nsation with a other person agreement, together with a	n or persons who are not a list of the names of the
5.	In r	eturn for the above-disclos e, including:	ed fee, I have agreed to rend	er legal service for all asp	ects of the bankruptcy
	a.	Analysis of the debtor's file a petition in bankrupto	inancial situation, and render	ring advice to the debtor in	n determining whether to
	b.	Preparation and filing of a	ny petition, schedules, state	ments of affairs and plan v	which may be required;
	c.	Representation of the debt hearings thereof;	or at the meeting of creditor	s and confirmation hearing	g, and any adjourned

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B2030	(Form	2030)	(12/15)	
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- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

	CERTIFICATION
I certify that the foregoing is a comp me for representation of the debtor(s) in S/3/16 Date	Signature of Attorney Low Office Q Davil L. Orland Indiana In

BANKRUPTCY CASE ATTORNEY/CLIENT RETAINER AGREEMENT

This Agreement is entered into by and between <u>Sherie L. Gechas (client)</u> and DAVID L. DEPEW, II (Attorney or Counsel) this 24th day of June, 2016. This Agreement explains the terms of Attorney's legal representation of Client and Client's financial responsibilities to Attorney.

- 1. Legal Services to be Rendered. Attorney is being hired by Client to represent him/her in a Chapter 7 bankruptcy. In return for the disclosed fee, Attorney has agreed to render legal service for all aspects of the bankruptcy case as set forth in Form B203 entitled DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR. Attorney has also indicated those aspects of this case that will not be included. All those terms are referenced herein and incorporated herein as if set forth at length. Client understands that a new Agreement will be required for any work not covered by this Agreement and that the new Agreement may require a new retainer.
- 2. Fee. Client has paid/agrees to pay the sum of \$1,800.00 as full payment for the services and representation by Attorney as his/her legal counsel and representative. In the event the fees have not been paid in full prior to filing, Client agrees to pay the balance pursuant to the following terms: N/A.
- 3. Filing Fees. In addition to attorney's fees, Client agrees to pay the initial filing fee of \$335.00 and such additional future filing fees as may be incurred during the administration of his/her file. These additional costs may be advanced by Attorney for ease of administration of the case/file, but these payments/advances by Attorney will be promptly reimbursed by Client when requested by Attorney upon reasonable notice during the course of the administration of the case.
- 4. Cooperation. Client understands the importance of communicating with counsel and in cooperating with and coordinating action with Attorney. Attorney will use his best efforts on behalf of Client, and Attorney will endeavor to keep Client fully informed regarding his/her case. If Client fails or refuses to provide necessary information or to reasonably cooperate with Attorney, Client understands that Attorney has the right in his sole discretion to withdraw from Client's case. Client will always use his best efforts to cooperate with Attorney and to provide all needed information relative to Client's case.
- <u>5. General Terms</u>. This agreement constitutes the entire agreement between the Client and Attorney. This agreement shall be governed by the Law of the State of Illinois. In the event a portion of this agreement is determined by the court to be void or unenforceable, the balance of this agreement shall remain in full force and effect.

David L. DePew, II, Attorney

date)

Client Sherie L. Gochas

date